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A critical discourse analysis of Curriculum for Excellence implementation in four Scottish secondary school case studies

Discourse: Studies in the Cultural Politics of Education

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Improving the health and wellbeing (HWB) of children and young people has become a policy priority due to perceptions of decreased mental health and academic outcomes. This interest is seen in the Scottish education policy, Curriculum for Excellence (CfE); however, ambiguity around the term ‘wellbeing’ may hinder successful curriculum enactment. Drawing on Foucauldian theories, a critical discourse analysis was conducted on four secondary school case studies to analyse how discursive constructions of HWB were recontextualised at the local level. Analysis found that schools primarily conceptualised HWB as either teaching for achievement of predefined learning outcomes or teaching as a process for character development, and these competing curricular aims may constrain teachers’ pedagogic autonomy and impede the more aspirational tenets of CfE policy. The findings point to the need for further clarification of CfE policy aims to better support implementation.

Keywords: curriculum; pedagogy; health and wellbeing; discourse; knowledge; power

Introduction

Improving the health and wellbeing of children and young people has become a policy priority among many high-income countries due to concern about a marked increase in the rates of young people being diagnosed with depression and anxiety (Olson, Blanco, Wang, Laje & Correll, 2014). In the Scottish context, current policy emphasises the prevention of ill health and the integration of services to achieve public health goals (Scottish Government, 2011) with schools and teachers seen as key to promoting student health and wellbeing (Priestley & Drew, 2016).

However, while wellbeing is applauded as a holistic goal, its achievement is usually hampered by ambiguity around the term ‘wellbeing’ that may lead to uncertainty in schools about how to convert government policy into everyday practice (Chapman, 2015).

This political interest is visible within Curriculum for Excellence (CfE), the Scottish national education framework that describes the ‘totality of experiences’ to be planned for young people aged 3-18 in schools. This learner-centred curriculum aspires to help students develop ‘four capacities’ to become successful learners, confident individuals, responsible citizens, and effective contributors (Scottish Executive, 2006). To achieve this, the Scottish Government has prioritised three core learning areas: literacy, numeracy, and health and wellbeing (HWB), which are considered the ‘responsibility of all’ school staff. The aim of the HWB component of the curriculum is to ensure that ‘children and young people develop the knowledge and understanding, skills, capabilities and attributes which they need for mental, emotional, social and physical wellbeing now and in the future’ (Scottish Government, 2009, p.1). Schools are supported in their enactment of policy by ‘experiences and outcomes’ (E&Os) – a series of first-person statements that set out what young people should experience and achieve as they progress through school (Gray, MacLean, & Mulholland, 2012).

It has been argued that the position of HWB as a core learning area was established as a result of the Scottish Government’s concerns about national health issues such as increased obesity rates, heart disease and poor mental health (Horrell, Sproule & Gray, 2012). Furthermore, policy documentation claims that mental, emotional, social and physical wellbeing are essential for successful learning and successful development of the four capacities. However, the ways in which teachers enact this curriculum may be related to the ways in which they conceptualise HWB (Gray, MacLean & Mulholland, 2012). This issue is further complicated by

the fact that the term wellbeing remains an elusive concept with competing discourses on the best way to conceptualise, measure or increase wellbeing (Spratt, 2017).

This study proposes to explore how conceptions of HWB are enacted in local school practice. To do so, Foucault's concepts of discourse, knowledge and power were used to analyse case studies that describe the ways four secondary schools enacted HWB policy. This research builds on previous critical discourse analyses conducted by Spratt (2016; 2017) on common discourses found in the CfE policy documentation, and aims to address two main research questions: 1. how discursive constructions of HWB in the CfE policy are recontextualised and enacted at the local level, and 2. how responsibilities of school staff and students are understood within local schools.

Background

Health and wellbeing: problems of definition

Despite the concept of wellbeing becoming prominent in political, educational, and public discussion, there is a lack of consensus on definition (Graham, 2011). Discussions about wellbeing are often linked to health, as seen in the CfE policy which references 'health and wellbeing' as a single unit, and discourse frequently points to the 1948 WHO definition that 'health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity' (cited in Spratt, 2017). This definition was ground-breaking as it moved beyond mere physical health to take on a more holistic view encompassing the individual's mental and emotional states.

Compared to more holistic conceptions, public discourse around children's HWB is often punctuated by dichotomous rhetoric of youth as both vulnerable to, or perpetrators of, risky

behaviour (Burrows & Wright, 2007). Improving children's HWB is seen as important due to reports of increased antisocial behaviour, poverty-related attainment gaps, and low school engagement (Watson, Emery, Bayliss, Boushel, & McInnes, 2012). This is especially the case in areas of social and economic disadvantage, where concerns about children being 'at-risk' or 'risky' serve as justification for policies and interventions to improve children's HWB (Burrows & Wright, 2007). Evans, Davies, and Rich (2008) suggest that this risk discourse can serve to assert control over the lives of young people and their families through techniques of surveillance and monitoring. Such interventions are underpinned by a socio-political agenda that sanctions intrusive controls and can lead to feelings of powerlessness and alienation, especially when interventions do not take account of the contexts of their lives. The ways in which this embodied position influences young people's health must be understood to inform the development of strategy intended to support them, and in doing so, problematise the neoliberal notion that young people and their parents must take responsibility for their own health. However, the shape these interventions take will ultimately be affected by tension between various discourses, because different discourses will suggest differing solutions to purported problems (Graham, 2011).

Health and wellbeing discourse and policy

Critics of risk discourses argue that they often frame wellbeing from a deficit standpoint that may regard children as passive victims of negative experiences (Graham, 2011). Critics point out that wellbeing is more than just the absence of problems, that it should also focus on strengths and enabling individuals to flourish (Dodge, Daly, Huyton, & Sanders, 2012). However, strengths-based and enabling discourses have also received criticism that they may favour the

creation of the ‘model’ student who exemplifies self-regulation to achieve ‘acceptable’ behaviour (Chapman, 2015).

Contemporary examples of the intersection of deficits vs. strengths-based discourses include the *Every Child Matters* (ECM) policy in England and Wales (Watson et al., 2012) and the *Getting It Right For Every Child* (GIRFEC) policy in Scotland (Scottish Government, 2008). Both policies underpin government and school directives, and have directly informed legislation to ensure the rights and safety of children and young people in the UK reflect recommendations in the United Nations Convention on the Rights of the Child. Both encourage interagency collaboration to support children, and conceptualise wellbeing as developmental and dependent upon children achieving the prescribed policy aims (Watson et al., 2012). Within these policies it is possible to see discourses from fields outside education, including medical (Ereaut & Whiting, 2008), therapeutic (Gillies, 2011), ‘flourishing’, economic (Burrows & Wright, 2007), and ‘care’ (Spratt, 2017).

In a discourse analysis of ECM, Ereaut and Whiting (2008) propose that conceptualisations of wellbeing primarily rely on medical discourses that focus on the connection between wellbeing and physical health. A common corollary of medical and risk discourses is a healthism discourse where children are positioned as individuals whose current and future HWB is threatened by ‘unhealthy’ choices (Crawford, 2006). This type of discourse is intended to encourage the production of responsible individuals who are obliged to safeguard and manage their health through learning of ‘safe’ practices (McEvilly, Verheul, Atencio, & Jess, 2012).

With holistic notions of HWB, Gillies (2011) suggests a therapeutic discourse of emotion management has also permeated British school policy. Therapeutic discourse comes from

psychology and emphasises mental, social, and emotional wellbeing, often articulated through concepts like emotional intelligence. Social and emotional skills, or the lack thereof, are often tied to perceived behavioural outcomes as seen in ECM's construction of emotional wellbeing as a remedy for 'crime and anti-social behaviour' (HM Treasury, 2003: p.6). This therapeutic discourse will advocate for the production of socially and emotionally competent individuals who can maintain 'appropriate' emotionality (Gillies, 2011).

Further holistic notions of HWB include 'flourishing' discourse that comes from philosophy and centres on the idea that wellbeing relies on individuals being able to live a life they have reason to value (Sen, cited in Spratt, 2017). Spratt (2016, original emphasis) comments that living a life one has *reason* to value implies that individuals have freedom to choose between different options for their own personal wellbeing. In schools, this discourse suggests interventions should focus on increasing children's autonomy to self-manage and improve wellbeing, and has also been argued as the most 'educational' because educators can provide learning opportunities for students to choose what is worthwhile to them (Spratt, 2017). Notably, in previous critical discourse analyses of CfE policy, Spratt (2016; 2017) found limited reference to flourishing discourse and claimed that CfE policy appeared to overlook the intrinsic value of education, subsuming it to academic achievement.

Another common discourse focuses on economics, demonstrated through overt language about children 'not being prevented by economic disadvantage from achieving their full potential' (HM Treasury, 2003: p.6). However, researchers caution that many economic discourses conceptualise the 'poverty-related attainment gap' as something that can be conquered through proper student training and knowledge transfer (Watson et al., 2012), and contain a neoliberal emphasis on individual responsibility for overcoming barriers (Spratt, 2017).

Beliefs that students can succeed if they just work hard and learn the required curriculum skills, minimise the structural inequalities that some children face (Udagawa, 2014). This legitimises social inequity, positions students as accountable for overcoming disadvantage, and may inadvertently lead to ‘student-blaming’ where children are judged on the basis of their achievement of HWB (Crawford, 2006).

In contrast to the aforementioned discourses which emphasise individual responsibility, ‘care’ discourse comes from the field of social care and focuses on adults’ responsibilities to work collaboratively to protect children’s rights (Spratt, 2016). This discourse is demonstrated in the CfE policy’s repetition of ‘responsibility of all’ and emphasis on interagency work to promote wellbeing. Noddings (2005) argues that to be a truly caring relationship, the carer and the cared-for should be equals, with children’s right to have a say in their education protected. However, within professional caring relationships, teachers are usually fixed in the carer role, leading to teacher-driven care that may constrain students’ autonomy (Spratt, 2017).

Spratt (2017) asserts different discourses from fields outside of education have crept into school wellbeing policies. She contends that the plethora of discourses show how wellbeing can act as a unifier that brings together different agencies for the benefit of children. However, she also acknowledges that competing discourses may emphasise different directives causing confusion for schools as they attempt to enact policy.

Policy enactment in schools: national program directives

At the national level, policy discourses have led to school-based programs like Social and Emotional Aspects of Learning (SEAL) in England and CfE in Scotland (Watson et al., 2012). The SEAL program used the Every Child Matters policy as a template to create a school practice

framework. The CfE framework, founded on GIRFEC aims, directed HWB to be an essential curriculum focus (Spratt, 2017). Within SEAL there are several references to deficit and therapeutic discourses that conceptualise HWB, especially social and emotional wellbeing, as learned skills necessary for better behavioural outcomes. This is seen in the definition provided for self-regulation: “When we have strategies for expressing our feelings in a positive way and for helping us to cope with difficult feelings and feel more positive and comfortable, we can concentrate better, behave more appropriately, make better relationships, and work more cooperatively and productively with those around us” (Department for Education, 2010, p. 5). This form of HWB construction will then oblige the teaching of individualised emotional control in order to reduce the threat of antisocial behaviour, poor learning outcomes, and reduced wellbeing (Gillies, 2011). CfE relies on medical, therapeutic, and economic discourses that also conceptualise HWB as necessary for successful learning. This HWB conceptualisation may compel teaching of specific skills and charge students with the responsibility to become citizens who express socially acceptable behaviours and emotions, and contribute back to the economy (Spratt, 2017).

While national policies contain various discourses that attempt to influence behaviour, dominant discourses are not always accepted entirely (Spratt, 2017). Policy writers cannot control the meaning of their text as it enters into the context of practice. Educators bring to their interpretations unique experiences, knowledge and values that enable them to adopt, adapt or even reject the policy text (Ball & Bowe, 1992). Consequently, it is very difficult to know how policy is understood and enacted at a local level and how this enactment is influenced by competing discursive conceptualisations of HWB. Therefore, the purpose of this study is to conduct a Foucauldian-inspired critical discourse analysis to understand how CfE HWB

discourses were understood and enacted within the local context. This was done by analysing four case study documents that described local school HWB enactment practices and were portrayed as ‘best practice exemplars’ for other schools.

Methods

Discourse and power: Foucauldian theories

Discourse is commonly understood as language that can be used to construct social life and make certain ways-of-being or ways-of-thinking acceptable (Willig, 2008). Educational policy is considered a type of text that embodies discourses articulating beliefs, values and practices of society (Rossi, Tinning, McCuaig, Sirna, & Hunter, 2009). Hence, these policy texts and the discourses within them socialise the population by defining the norms and rules of how individuals are to behave (Spratt, 2017).

Discourse is commonly associated with Michel Foucault, a social philosopher known for his treatises on the indivisibility of power and knowledge (Foucault, 1980). Foucault argued that discourse was the embodiment of power and knowledge because of its ability to define ‘truth’ and that power was exercised through preferential access to discourse. Knowledge can become so influential that it produces a ‘regime of truth’ that makes it difficult to see or think in any other way and can create a powerful constraint on how and what can be done (MacNaughton, 2012).

Foucault theorised that within modern schooling institutions, power is mainly operated through technologies of power like classification, normalisation, surveillance, and regulation - mechanisms through which norms of thought and behaviour are produced (Foucault, 1979; Gore, 1995). For example, *classification* occurs when individuals are differentiated by dominant

discourses such as a risk discourse defining those who may be ‘vulnerable’ or ‘at risk’.

Normalisation often works through comparison where certain activities are deemed appropriate.

For instance, within therapeutic discourse, positive emotional states are often socially constructed as ‘normal’, while negative affect may be pathologised as ‘at risk’. *Surveillance* occurs when individuals are being or expect to be monitored with reference to certain truths (Gore, 1995). This constitutes the ‘normalising gaze’ whereby individuals anticipate being evaluated according to norms that delineate proper behaviour and *regulate* themselves to avoid judgement.

Critical discourse analysis

‘Critical discourse analysis’ (CDA) is generally understood as the examination of communication to uncover how language is used and for what purpose. It questions the text to understand how language is recruited to define truth, what is normalised or pathologised, and what practices are made acceptable by these ways of thinking (Rossi et al., 2009). As this research aims to examine how policy texts are enacted in secondary schools and how HWB discourses may control school practices and behaviours, Willig’s (2008) Foucauldian-inspired theoretical framework (adapted in Table 1 below) was chosen because it analyses the ways discourse can be used to control social and pedagogical practices. This framework explores how discourses conceptualising wellbeing can create *subject positions* that may become a powerful ‘truth’ that defines what ways of thinking or practices are possible. For example, within care discourse that emphasises adults’ responsibility to protect children, students labelled as ‘at risk’ are positioned as subjects in need of saving, which may compel teachers towards increased surveillance and intervention, and inhibit students’ autonomy.

Table 1: Foucauldian-inspired theoretical framework (adapted from Willig, 2008)

Stage	Description
1. Discursive constructions	How is wellbeing constructed through language?
2. Discourses	What discourses are utilised in this construction of wellbeing?
3. Action orientation/functioning	How do these constructions function such as promoting one 'truth' over another?
4. Positionings	How are subjects positioned within this construction of wellbeing?
5. Practice	What are the possibilities for action presented by the discursive construction of wellbeing?

Documents for analysis

In order to understand how power structures within CfE's wellbeing discourses work to control behaviour (of education staff and students), four secondary school case studies were examined. The studies were produced by an external consulting firm at the behest of Education Scotland (ES), the national body in Scotland for supporting quality and improvement in learning/teaching. Their purpose was to construct accounts of HWB implementation in four case site schools - how schools interpreted HWB; what actions were taken to implement policy; the impact this had on schools, students, and staff; and what forms of evidence were used to demonstrate the impact of HWB. In each school, the consulting firm conducted discussion groups with leaders, teachers, partner organisations, and with pupils. The case studies are publicly available on the ES National Improvement Hub website, a searchable repository of good practice resources for educators

interested in improving the quality of learning and teaching. Each case study is presented as a text document with the intended audience of teachers, senior managers and head teachers in secondary schools (Education Scotland, 2018). The four schools were highlighted because ES considered them to have demonstrated good progress in implementing HWB; as such, these school sites may not be representative of all Scottish schools. However, the case studies were selected for analysis because by highlighting them as ‘good practice exemplars’, ES may be using them as a normative standard to influence the actions of other local schools. The University of Edinburgh ethical procedures were followed, and ethical approval was granted.

Overview of the study schools

The schools serve students age 12-18 in different Local Authorities. Two schools - Kirkland High School and Community College in Fife and Smithycroft Secondary School in Glasgow - are from areas with high levels of deprivation (decile one on the Scottish Index of Multiple Deprivation). The other two are from areas with low levels of deprivation - Calderglen High School in South Lanarkshire (decile seven, fairly affluent) and Meldrum Academy in Aberdeenshire (decile ten, mostly affluent) (Education Scotland, 2018).

Data analysis

Analysis occurred in a multi-step process of initial coding to categorise comparable HWB school practices into themes which were then analysed to identify various discourses using a discourse manual developed *a priori* based on common discourses used to conceptualise HWB - available in Table 2 (Spratt, 2017).

Table 2: Discourse manual

Discourse	Definition	Example
Physical health promotion (stemming from medical discourse)	HWB conceptualised as the promotion of physical health behaviours with a focus on individual choice	'Fitness for Life' programme, which involves pupils receiving an extra period of PE a week to focus on their fitness
Social and emotional literacy (stemming from therapeutic discourse)	HWB conceptualised as the understanding and management of emotions within social situations	Young people are encouraged to discuss all aspects of their work, with a strong emphasis on feelings
Care (stemming from discourse around social care)	HWB conceptualised as interagency collaboration to protect and promote the rights of children	Collaboration between the school nurse and school Chaplaincy Group to deliver anti-stress techniques
Flourishing (stemming from philosophical discourse)	HWB conceptualised around supporting students' freedom to choose what is valuable to them	Meldrum Academy provides young people with opportunities to be active participants, take leading roles, and develop relationships
Operational outcomes (stemming from accountability discourse)	HWB conceptualised as its outcomes and effects	Kirkland High undertakes an annual review of health and wellbeing, structured around the experiences and outcomes
Deficit-based discourse (stemming from discourse around social care)	HWB conceptualised as strategies to reduce perceived shortcomings	Staff 'profile' the young people, taking account of family background and experiences, and identify targets for each individual
Strengths-based discourse (stemming from discourse around social care)	HWB conceptualised as strategies to build on strengths	Both staff and young people take part in a 200-question survey which generates five core character strengths

The themes were then examined using the Foucauldian theoretical framework (Table 1) to explore how the schools conceptualised wellbeing, what common discourses were used, and what implications these conceptualisations might have had on the actions and responsibilities of staff and students. Analysis discerned schools primarily described and conceptualised HWB as serving two distinct goals, which are discussed below.

Discussion of Results

This study found two main constructions of HWB as teaching for outcomes or as a process for character development. There is tension between these constructions as each will imply different modes of action and evaluation by school staff, which may leave teachers caught between conflicting curricular aims.

Construction 1: Health and wellbeing as teaching for outcome achievement

In this construction, schools predominantly seemed to conceptualise HWB as a pedagogic approach for teaching skills to achieve specified outcomes (i.e. E&Os and positive destinations for learners after graduation), and appeared to view HWB as teachable skills required for learning and attainment (Spratt, 2017). Three themes developed around schools focusing on HWB implementation to facilitate outcome achievement, emphasising collaborative working to support HWB implementation, and using HWB outcome attainment as a measurement of success.

Theme 1: Focusing on HWB implementation to facilitate outcome achievement

The case studies specifically emphasised integrating and achieving outcomes in the reports. This focus on outcomes is seen in the way schools describe their curricular decisions. For example:

Kirkland High undertakes an annual review of health and wellbeing, structured around the experiences and outcomes within Curriculum for Excellence. The school considers each of the outcomes, and how different subjects can contribute to achieving these. (Kirkland High)

It has taken a structured approach to ensuring that the responsibility of all areas are considered across the school, starting with a subject audit. The Principle Teacher supported each department (and staff member) to record how their work linked to the health and wellbeing responsibility of all outcomes. (Smithycroft Secondary)

These statements suggest schools are focusing on achieving outcomes like the E&Os in order to structure and evaluate teaching practices. According to Foucault, these E&O expectations constitute a ‘regime of truth’ that regulates teachers’ actions and may push teachers towards an audit-type approach for enactment and assessment (MacNaughton, 2012; Priestley & Minty, 2013). This was evident with case schools noting the use of systematic audits to identify how different subjects contribute to the outcomes.

Theme 2: Emphasising collaborative working to support HWB implementation

Contrary to a previous discourse analysis of CfE that found HWB was mainly conceptualised as the individual responsibility of students (McEvilly et al., 2012), the case studies appear to focus more on the responsibilities of adults. The most prominent discourse within this construction was one of ‘care’. Care discourse focuses on adults’ responsibilities to work collaboratively in the service of child protection (Spratt, 2017) and was often linked to operational and deficit-based discourse. This discursive link emphasises an ethos of cooperation and joint responsibility to safeguard children and facilitate attainment of the HWB outcomes. For example:

Responsibility of All in its widest sense extends beyond the school to the community, partners, agencies and the local authority. The school and its partners have a single objective which at its heart is getting it right for all young people. (Meldrum Academy staff member)

The mental health of young people had been a concern for the school, as there had been a small, but not insignificant number who were self-harming. They arranged for Scottish Association for Mental Health to come to school to train the pupils in a resource called SafeTALK which is a suicide awareness training tool. (Calderglen High)

The first statement explicitly references the GIRFEC policy focus on shared accountability to improve outcomes for children (Scottish Government, 2008), and both statements appear to reiterate CfE's rationale that HWB is necessary to diminish the perceived risks facing children. This emphasis on protecting children highlights one of the critiques of caring – that a 'top-down' approach to care means there is an inherent power differential between staff and students (Noddings, 2005). This power hierarchy may position school staff as experts tasked with safeguarding children's rights and wellbeing, as well as responsible for the transmission of requisite knowledge (Willig, 2008; Priestley & Humes, 2010). This may then lead to care that is 'done to' children and treat them as passive agents reliant on adults to make decisions on their behalf, which conflicts with aspirational language that advocates for raising student autonomy and capabilities.

These subject positions may again act as a regime of truth and compel teachers to use technologies of power to control student activity (Gore, 1995). This was seen in the case studies with the focus on 'monitoring' and 'identifying' (*surveillance*) those students 'vulnerable' or 'at risk' (*classification*) for decreased HWB (*normalisation*) in order to 'tackle the situation' and 'improve outcomes' (*regulation*). This is especially concerning for those pupils from socially and economically disadvantaged backgrounds who may be more likely to be classified as at risk. Evans and Bairner (2013) argue that interventions designed to support their health and wellbeing

must begin from a position that takes account of their lives and how they understand and embody health. Failure to do so by creating top-down and controlling contexts for learning may result in feelings of disempowerment, alienation, shame or stigmatisation.

Theme 3: Health and wellbeing outcome attainment as a measurement of success

All of the schools concentrated on demonstrating positive results from HWB enactment, primarily focusing on measurable methods like achievement of the E&Os as evidence of impact:

Kirkland High is clear that its primary aim in integrating health and wellbeing within the school is to achieve the outcomes set out in Curriculum for Excellence. It monitors attainment and achievement levels, and school staff believe that the approach to health and wellbeing has contributed...to recent improvements in attainment and achievement. The school has also seen an increase in positive leaver destinations. (Kirkland High)

By linking measurable outcomes as evidence of impact, the case studies seem to equate E&O-achievement with success which may create a normative standard that necessitates frequent monitoring for evidence. This standard may then be used to inspect and evaluate teachers' activities and might compel 'scholastic accountancy' (Ball, 2003). Some schools questioned this evaluation approach, particularly in relation to time barriers, and felt the approach increased pressure on teachers to formally document their practices. However, schools may not have felt confident in challenging policy and justified the accountability measures by equating them with established practices:

We always did it [health and wellbeing] anyway, but now it's all recorded, and it's more work for everyone...for this thing we were already doing. (Smithycroft Secondary staff member)

The main challenge was time. Teachers were initially quite reluctant, seeing this as 'something else to add to an already very busy workload.' However, initial fears were allayed through Continuing Professional Development, and an understanding that teachers would be 'promoting and identifying what we are doing already.' (Kirkland High)

In these excerpts both Kirkland and Smithycroft (schools serving high deprivation areas) reference HWB implementation as challenging due to extra work and time barriers, as well as equate new HWB practices with previous teaching methods. This may be problematic as Priestley and Minty (2013) suggest schools that do not have time to engage with the CfE curriculum commonly rely on previous pedagogical practices and are less likely to innovate. Additionally, it has been argued that if CfE privileges one type of objective, then the curriculum will likely be restricted by the objectives used for assessment purposes (Priestley & Humes, 2010). In the case studies, equating E&O-attainment and success may constrain pedagogy to approaches that will expressly lead to those outcomes. This limiting of teaching practices has been described with notions like ‘teaching to the test’ (Priestley & Minty, 2013), and supports what Ball (2003) calls a ‘culture of performativity’ which may be problematic if it inhibits teacher flexibility and innovation (Priestley & Humes, 2010).

Again, this can be especially damaging for young people from areas of social and economic disadvantage, who are typically marginalised by traditional, teacher-centred approaches. For those young people it is likely that practices associated with a culture of performativity, e.g. making judgements, comparisons, and use of sanctions, may be damaging to their health and wellbeing (Lupton, 2005). Lupton (2005) suggests that young people from disadvantaged backgrounds benefit both academically and emotionally from creative pedagogies (Jeffrey & Woods, 2009) that are founded on democracy and inclusion, and rely on the teacher’s professional expertise, risk-taking and relationship with their pupils. Importantly, these approaches reject the notion of fixed ability and assume that all pupils are capable of transformation, and thus, they have the capacity to contribute to more equal educational outcomes.

Construction 2: Health and wellbeing as a process for character development

Another dominant conceptualisation within the case studies is HWB as a process for character development, which views HWB as the collective activities to enable development of the four capacities (Scottish Executive, 2006). Two themes developed around supporting positive relationships with students and enabling student engagement and participation.

Theme 1: Emphasising collaborative working to support student and staff relationships

There was an interesting shift in the case studies when discussing relationships. When relationships were treated as an outcome, the focus was on teaching skills to sustain relationships. However, when focusing on HWB as a process, relationships were described in a more interactive and participatory way:

‘Nurture’ is a key focus at Smithycroft Secondary School – and is one of the most innovative ways in which the school supports its young people to develop positive relationships. Nurture groups are designed to enhance young people’s opportunities to interact with others in a positive way in a safe environment, something they may have been unable to develop in their home environment. (Smithycroft Secondary)

Many initiatives across the school promote positive relationships including the Acts of Kindness project. They have been given small ‘act of kindness’ cards to help them notice opportunities to practice kindness and encourage others to do the same. Young people reported this gave them a ‘sense of purpose.’ (Calderglen High)

When focusing on participatory relationships the schools show more parity, allowing for back-and-forth contribution of teacher and learner, and appear to balance responsibility between adults to enable opportunities for learning and on learners to participate in learning. In this process-focused construction, the dominant discourse was one of flourishing, where students are encouraged to take ownership of their learning. Flourishing discourse appears to favour social

liberal ideology and ideals of equity and justice. Within this ideology, education should support students' capabilities to decide what is of value to them regardless of socioeconomic background (Croxford, 2010).

Notably, in these excerpts Smithycroft (serving a high deprivation area) appeared to reference deficit-based discourse more than Calderglen (serving a fairly affluent area), acknowledging the unequal home lives some students face. This represents the ways curricular goals may be transformed from policy to practice, and compared to a prior CDA of CfE that found limited reference to flourishing discourse (Spratt, 2017), the case study schools appeared to balance neoliberal and social liberal discussions. However, this possibility for increased focus on deficits for students in more disadvantaged areas may lead to unequal learning opportunities. Students perceived as 'at risk' may be subject to more school intervention in the name of protection, which may have the unintended effect of these students having fewer opportunities for autonomy and self-directed learning (Bialostok, 2015).

Theme 2: Providing opportunities for students to participate and contribute

The case studies often highlighted schools' efforts to support student involvement in shaping the curriculum:

Meldrum Academy provides young people with opportunities to be active participants, take leading roles, and develop relationships. Young people felt involved and listened to, due to open two-way dialog and a culture of inclusiveness. (Meldrum Academy)

Kirkland High uses a 'Distributive Leadership Model' – promoting an open culture and collaborative working – which was seen as vital to its success. Leaders and teachers agreed that being open and willing to consider anything that was offered to the school (within reason and remit) meant that young people had more opportunities to be part of something positive. (Kirkland High)

These statements highlight collaborative working, but appear less hierarchical than the caring discourse involving schools making decisions for students. In these statements the student-staff relationship seems more egalitarian and focuses on children's ability to choose what is personally important to them. Within this HWB construction, schools and students are involved in a more egalitarian relationship with students positioned as autonomous agents with the right to self-determination, and school staff positioned as facilitators of this student development (Priestley & Minty, 2013). These subject positions will impact both schools' and students' actions such that pupils will have more agency and be expected to take an active role in affecting their own learning (Willig, 2008). Teachers would also have more flexibility to move away from narrow outcome-based teaching and experiment with pedagogic changes.

However, teacher autonomy does not only depend on individual capability, but also the interaction between individuals and their context (Priestley and Minty, 2013). Hence, while CfE emphasises higher levels of teacher autonomy, teachers may be limited by structural features of their environment and unable to enact the curriculum as it was intended. This restriction is visible in the case studies, such that 'time' was mentioned by all schools as having an impact on successful implementation of HWB approaches. Notably, the more affluent schools noted time as a positive factor, with teachers provided dedicated time to devote to HWB. Conversely, the more disadvantaged schools both noted a lack of time and resources as barriers to enacting policy. This difference may have ramifications on educational experiences and perpetuate inequality if disadvantaged schools struggle more with barriers that decrease teachers' ability to recontextualise policy to suit their students' needs.

Furthermore, teacher autonomy may be constrained by evaluation requirements. The E&Os have been set out as the standards against which teachers are to evaluate day-to-day

learning (Scottish Government, 2011) which may be problematic because it is argued that to maximise the potential for development, evaluations need to be flexible rather than predefined (Priestley & Humes, 2010). Stenhouse (cited in Priestley & Humes, 2010) argued that predefining objectives potentially narrows the curriculum and may inhibit innovation and creativity. This may leave school staff caught in the middle between two contradictory goals: defined objectives and open-ended opportunities for student development (Reeves, 2008). This tension was apparent in the case studies with some staff reporting feeling supported to be more autonomous, yet the schools all relied on prescribed outcomes (E&Os) to guide planning and enactment.

Conclusion

The aim of this study was to understand how HWB policy discourse was interpreted and enacted at the local level, and what effects this might have had on the actions of school staff and teachers. The findings revealed two main constructions of HWB in the schools as either teaching for outcome achievement or as a process for character development, and mostly relied on differing discourses (i.e. care and flourishing respectively). Tension arose because these two constructions implied different modes of action from educators.

HWB centred on outcome achievement puts responsibility on teachers to transmit the required knowledge and may lead teachers to rely on predefined objectives to evidence learning. Constricted emphasis on outcomes may stifle both teacher and student autonomy (Priestley & Drew, 2016) and conflicts with the underlying aspiration of HWB as a process to give greater flexibility to teachers to enable student-driven learning. Competing discourses around wellbeing may leave schools uncertain how to convert curriculum goals into practice and may lead schools

to depend on previous practices that might inhibit pedagogical innovation and maintain the status quo (Priestley & Drew, 2016).

These findings suggest that in order to encourage successful curriculum implementation and support educators, additional clarification around curricular goals and assessment measures is needed. Furthermore, schools may need more time to engage with local curriculum planning, especially those schools located in areas of social and economic disadvantage. The case studies revealed there were differences between affluent and disadvantaged schools in perceptions of implementation barriers, particularly time availability. Previous research has shown that if teachers do not have time to fully engage with the principles of CfE, they may be more likely to rely on previous practice and allow assessment needs to drive pedagogy (Priestley & Minty, 2013). This may have negative consequences on the HWB and equity of learning opportunities for more disadvantaged students if teachers do not have the time or capability to recontextualise the curriculum to suit these students' needs. This may also lead to apprehension and decreased HWB for educators if schools feel unable to make meaningful changes to the curricular agenda.

A limitation of this research was that it relied upon pre-produced case studies which limited the study authors' ability to solicit further clarification from school participants. Additionally, the case studies profiled schools deemed to be demonstrating good HWB implementation and held up as models for other schools to improve their practices. As such, these schools are more likely to be aligned with government policy aims and may not be representative of other Scottish schools. Further research could aim to generate primary qualitative data exploring how teachers engage with and enact HWB policy in real life, and the effects of this enactment on students from disadvantaged backgrounds. Participation in the research process may facilitate deeper learning for educators and support their confidence in

pedagogic planning and innovation of methods to support students from disadvantaged backgrounds.

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